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Application No. 10/829,107
Examiner: Swartz, Rodney P.
In re Application of Jenny Valladeau *et al.*
Filed: 04/21/2004
Group Art Unit: 1645
Attorney Docket No.: SF0695C

Dear Sir/Madam:

Transmitted herewith are:

- Response Transmittal - 1 page
- Extension of Time (1 month) - 1 page IN DUPLICATE
- Response - 7 pages
- Certificate of Fax Transmission - 1 page
- Fax Cover Sheet - 1 page



MICHAEL G. BIRO

Patent Attorney, Reg. No. 46,556

52143_1.DOC

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Attorney Docket No.: SF0695C

Application No.: 10/829,107

Filing Date: April 21, 2004

First Named Inventor: Jenny Valladeau et al.

PTO/SB/87 (08-03)

Approved for use through 07/31/2006. OMB 0851-0031
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/829,107	
	Filing Date	04/21/2004	
	First Named Inventor	Jenny Valladeau et al.	
	Art Unit	1645	
	Examiner Name	Swartz, Rodney P.	
Total Number of Pages in This Submission	12	Attorney Docket Number	SF0695C

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
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<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
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Signature	<i>Michael G. Biro</i>	
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Date	March 31, 2005	Reg. No. 46,556

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PTO/SB/22 (12-04)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 <small>((Fees pursuant to the Consolidated Appropriations Act 2005 (H.R. 4818))</small>		Docket Number (optional) SF0695C
Application Number 10/829,107		Filed 04/21/2004
For Isolated Mammalian Membrane Protein Genes; Related Reagents		
Art Unit 1645		Examiner Swartz, Rodney P.
This is a request under the provisions of 37 CFR 1. 1 36(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check the period desired and enter the appropriate fee below):		
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	Fee \$120	\$ 120.00
<input type="checkbox"/> Two months (37 CFR 1. 1 7(a)(2))	\$450	\$ _____
<input type="checkbox"/> Three months (37 CFR 1. 1 7(a)(3))	\$1020	\$ _____
<input type="checkbox"/> Four months (37 CFR 1. 1 7(a)(4))	\$1590	\$ _____
<input type="checkbox"/> Five months (37 CFR 1. 1 7(a)(5))	\$2160	\$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1-27.		
<input type="checkbox"/> A check in the amount of the fee is enclosed.		
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account:		
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 19-0365 I have enclosed a duplicate copy of this sheet.		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the <input type="checkbox"/> applicant/inventor.		
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).		
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number 46,556		
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____		
<u>Michael Biro</u> Signature		<u>March 31, 2005</u> Date
<u>Michael G. Biro</u> Typed or printed name		<u>908-298-5098</u> Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input type="checkbox"/> Total of _____ forms are submitted.		

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1-1.1 and 1-1.4. This collection is estimated to take 6 minutes to complete, including gathering preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office U.S. Department of Commerce P.O. Box 1450 Alexandria, VA 22313-1450 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (optional)
FY 2005 <small>((Fees pursuant to the Consolidated Appropriations Act 2005 (H.R. 4818))</small>		SF0695C
Application Number 10/829,107		Filed 04/21/2004
For Isolated Mammalian Membrane Protein Genes; Related Reagents		
Art Unit 1645		Examiner Swartz, Rodney P.
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check if the period desired and enter the appropriate fee below):		
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<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$ _____
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$ _____
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$ _____
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1-27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-0365</u> I have enclosed a duplicate copy of this sheet.		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>46,556</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____		
<u>Michael Biro</u> Signature		<u>March 31, 2005</u> Date
<u>Michael G. Biro</u> Typed or printed name		<u>908-298-5098</u> Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. <input type="checkbox"/> Total of _____ forms are submitted.		

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